

Our Lady of Mt Carmel Primary



YEAR 5 EXCURSION - BONDI SCULPTURES BY THE SEA

<u>NAME OF EXCURSION:</u>	Sculptures By The Sea Bondi
<u>PURPOSE OF EXCURSION:</u>	To experience and appreciate artworks in an out of class environment that is both educative and enjoyable
<u>DATE:</u>	Wednesday 5 th November, 2014
<u>PLACE:</u>	Bondi Beach
<u>MODE OF TRANSPORT:</u>	Bus
<u>TIME OF DEPARTURE:</u>	9:00am
<u>TIME OF ARRIVAL BACK AT SCHOOL:</u>	3:00pm
<u>NUMBER OF ADULT SUPERVISORS:</u>	4 teachers and 6 parent volunteers
<u>COST:</u>	\$14.00 will be deducted from the Excursion fee Levy
<u>ITEMS REQUIRED:</u>	Please wear sports uniform including hat and bring morning tea, lunch and snacks in a small bag. Also pack sunscreen.

Please return the signed section below to Mrs Chehade or Ms Mikhael by Thursday 30th October, 2014.

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YEAR 5 EXCURSION BONDI SCULPTURES BY THE SEA PERMISSION NOTE

I give permission for my child _____ in class _____ to attend the excursion to Bondi Sculptures By The Sea, Wednesday 5th November, 2014. I understand that travel will be by bus.

Is your child allergic to any drug? _____
(If so, please name drug)

Is your child at present on any medication? _____
(If so, please name medication)

Parent/Carer Name

Parent/Carer (Signature)

Date

This excursion requires parents to assist with supervision. If you are able to attend the excursion, please complete the form below and return to school as soon as possible. It is not always possible to take all available parent volunteers. You will be notified if your attendance is required on this occasion.

- I have attended Child Protection Briefing for Volunteers.
- I have completed the online component of Child Protection training.

Name _____ Signed _____

IMPORTANT: THIS SECTION MUST BE RETURNED BY THURSDAY 30th October, 2014.

CULTURE | LEARNING | ENGAGEMENT

